



PTO/SB/81 (01-09)

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<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<b>Application Number</b>	09/355,149
	<b>Filing Date</b>	10/05/2001
	<b>First Named Inventor</b>	Kolder
	<b>Title</b>	Defibrillator Enclosure with
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	09124

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

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Practitioner(s) Name	Registration Number
Charles F. Meroni, Jr.	20,109

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I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	9/21/09
Name	Keith Hochhalter	Telephone	847-487-9375
Title and Company	President, Prior Art, Ltd.		

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.☐ \*Total of \_\_\_\_\_ forms are submitted.

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